DHCS LIEN PROCESS: WRONGFUL DEATH

DHCS will send a "lien" or "no lien" letter to the appropriate parties.

Injury is reported via Online Forms

If ineligible, DHCS sends a "no eligibility letter" to the submitting party.

DHCS checks for Medi-Cal eligibility

Once payment data arrives, a DHCS Representative will review and create a lien, if applicable. **COLOR KEY**

- Attorney, Insurance, or Beneficiary
- DHCS Process
- Collection Representative

If eligible, a Personal Injury case is created

DHCS orders payment data from Managed Care Plan (MCP). A DHCS Representative will contact the attorney, insurance, or beneficiary to request a filed complaint or written demand to determine if compensation for medical services is being sought.

Data may be ordered from multiple MCPs if the beneficiary is enrolled in multiple plans during the treatment period.

MCPs usually respond to DHCS' request for records within 120 days. However, additional time may be needed when records need to be ordered from multiple Independent Physician Associations (IPAs).

Prior to ordering payment data DHCS will allow 120 days to pass from the date of death.

Per Welfare & Institutions Code section 14115, providers have up to one year from the date of service to bill Medi-Cal. Providers typically bill Medi-Cal within four months of the date of service.

DHCS will send a case closure letter if there will be no compensation for medical services or will proceed with creating a lien if there will be compensation for medical services.

